### Voluntary Paternity Affidavit Program 2021 Hospital Survey Analysis

November 2022

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#### Introduction

The Iowa State University (ISU) Voluntary Paternity Affidavit (VPA) Program is a unique collaboration among the ISU Child Welfare Research and Training Project (CWRTP) and the Iowa Health and Human Services (Iowa HHS-Child Support Services and Bureau of Health Statistics, BHS). The VPA Program is housed within ISU, and its team communicates closely with its state agency partners to develop best practices for paternity establishment by VPA in Iowa birthing hospitals. The program also has a broader goal of implementing a fatherhood initiative in Iowa, aimed at increased resource availability, social support, and outreach directly to Iowa fathers. To successfully implement these activities and initiatives for the VPA program, a VPA workgroup was formed in June 2016 with key personnel from each entity (ISU-CWRTP and Iowa HHS).

### **Project Background**

### Father Involvement

It is well established that father involvement increases positive developmental outcomes for children (Adamsons & Johnson, 2013; Amato & Gilbreth, 1999; King & Sobolewski, 2006). Research suggests that father involvement is associated with children's academic success, social, and emotional development. (Baker et al., 2018; Elam et al, 2015; Jia et al., 2012; Vallotton et al, 2016). Having a legal father offers legal protections to this important relationship. For example, establishing legal fatherhood ensures that the father is eligible to seek custody and visitation of his child, if circumstances permit. By establishing legal paternity, the child may also have access to financial support unique to their father (i.e., the father may add his child to his insurance policy as a dependent, the child may be eligible for their father's social security and/or veteran's benefits, etc.)

### Voluntary Paternity Affidavit

In Iowa, one method of paternity establishment for unmarried parents is through the completion of a notarized document called a Voluntary Paternity Affidavit (VPA). This document can be completed at any time during an individual's life, but is most commonly completed at the hospital at the time of the baby's birth. Hospitals in Iowa are required by law to provide patient education related to paternity establishment by giving patients a copy of a document called Establish Paternity By Affidavit (Comm. 107) The Comm. 107 contains information related to definitions of biological and legal paternity, the rights and responsibilities of a paternity affidavit, and commonly asked questions about paternity establishment (Iowa Department of Human Services, 2018). In the survey, four response options were provided for respondents to indicate at which point(s) during a patient's stay VPA education materials are given (upon patient admittance, before birth of baby, after birth of baby, upon patient discharge).

### Paternity Establishment Percentage

The State of Iowa is required by the federal government to achieve a certain percentage of paternity establishment among all unmarried parent births each year (45 CFR 305.40). This score is called a Paternity Establishment Percentage (PEP) and must be at least 90% of the previous year's documented unmarried parent births (45 CFR 305.40). Reaching this benchmark has financial implications for Iowa's Temporary Assistance for Needy Families (TANF) funds received by the federal government (45 CFR 305.61).

### **Current Study**

Iowa Health and Human Services communicated a need for targeted outreach broadly aimed at VPA education. Thus, since its formation in 2016, the VPA workgroup began its effort to increase Iowa's PEP, ensure that Iowa's children have legal securities to their father-child relationships, and ultimately provide protections for children's financial support.

The VPA workgroup developed a plan in 2021 to reach out to hospitals across Iowa to learn more about their VPA patient education processes. The information that was gathered from this process can be used alongside rejected VPA data from the Iowa Bureau of Health Statistics to reveal which hospitals' VPA processes yield the greatest VPA return (i.e., the least amount of rejected VPAs). The information gathered during this study expands on previous research by the VPA workgroup, which found that VPAs are commonly rejected based on "minor errors" (e.g., missing social security information, missing other information, formatting errors, etc.) (Weems et al., 2020). We approached the data with the following specific objectives:

- 1. Understand demographics of professionals assisting the public with paternity establishment at Iowa hospitals
- 2. Gather descriptive information on how VPA Patient Education is conducted
- 3. Gather descriptive information on which resources and materials are used throughout VPA patient education
- 4. And identify Areas of Improvement to the VPA education process from respondents' perspectives
- 5. We also examined information that led to the development of the following reports: VPA Process Reports, VPA Reasons Declined, VPA Rejection Reports, and VPA Rejection Reports Notaries

Each of these goals are addressed in a series of five reports, outlined below and included in the appendices.

#### Methods

#### Measures

The VPA workgroup developed a questionnaire and surveyed Iowa hospital birthing unit staff. The questionnaire focused on procedural routines related to patient education and completion of the VPA in each birthing unit. The questionnaire contained three main parts: demographics, VPA patient education processes, and notary processes.

The questionnaire (see Appendix F) asked relevant demographic information of the respondent (e.g., respondent's position at hospital, city of hospital, and name of hospital). VPA patient education questions included, "Please mark all materials your hospital uses for **unmarried** patient education purposes" and "At what point during a patient's stay do you typically provide the materials indicated in the previous question?" Additionally, paternity establishment patient education questions were asked, such as, "We define 'legal father' and 'paternity establishment' for all unmarried parents during their stay" and "We thoroughly explain the benefits of paternity establishment for unmarried parents during their stay." Questions were also asked about why, from the perspective of hospital staff, unmarried parents typically decline to complete a VPA.

Each VPA must be notarized, and hospitals typically have a notary on staff for this purpose. Thus, the questionnaire also addressed the accessibility and availability of notaries. Iowa has seen a major decline in birthing units since 2000, with 41 birthing units closing between 2000 and 2021 (Rouse et al., 2022). Of Iowa's 99 counties, the only birthing unit in the county was closed for 23 counties while another 23 counties never had a hospital (Rouse et al., 2022). As of 2018, 53 of Iowa's 99 counties had at least one birthing unit open in the county (Rouse et al., 2022). We asked whether and how hospital staff have seen these closures affect their patients. Lastly, knowing that the COVID-19 pandemic interfered with typical hospital processes, we asked whether and what specific influences the pandemic had on VPA processes in particular.

### **Procedure**

To gauge the relevance of questions created for this questionnaire, three individuals from the VPA workgroup's hospital contacts were called and/or emailed for a brief interview. These three individuals were hospital birthing unit staff who consistently communicate with the VPA workgroup at ISU, especially regarding VPA education materials orders. Topics discussed with these individuals included VPA reference materials used, VPA patient education procedures, notary accessibility, and Spanish language services. Using this information, a questionnaire was created using Qualtrics. This information was used to guide the development of the questionnaire.

Birthing units across Iowa order educational materials from the VPA Program webpage. Additionally, a bi-monthly newsletter is sent to birthing unit contacts across Iowa. Thus, the VPA workgroup has ongoing contact with a list of birthing unit staff from hospitals across the state. The electronic Qualtrics survey was advertised via the November 2021 VPA Newsletter and targeted outreach using the list of VPA contacts in separate emails advertising the survey and an incentive to participate. Between the newsletter and direct emails, about 145 eligible respondents were invited to participate. The first fifty participants to fully complete the questionnaire received an incentive of a \$50.00 electronic gift card for the Tango Card Rewards Catalog. Multiple respondents from the same hospital were allowed and encouraged. Data collection began on November 1, 2021, and ended on November 30, 2021. Forty-seven eligible respondents participated in this survey.

#### Results

A series of five sets of analyses were developed after data collection ended to address each of the objectives noted above. These reports were used to inform stakeholders (Iowa HHS) of information affecting Iowa's paternity establishment percentage on a timely basis. This included information such as reasons for VPA rejection, hospitals' respective VPA rejection rates, and detailed notary information. Iowa HHS expressed an interest in developing short-term ideas to increase VPA acceptance rates and increase Iowa's PEP before the end of the 2022 federal fiscal year (ending September 30, 2022). A narrative summary of the information from these sets of analyses is presented below with data details for each of goals appendices I-V at the end of this report).

### **Report I: Preliminary Results Snapshot**

### **Demographics**

First, a demographic report was developed and found that the majority of respondents (n = 47) were in administrative roles (45%) followed by nurses (43%). Of administrators, roles included patient access rep, data integrity specialist, health unit coordinator, OB director, cultural services coordinator, and birth registrar. Social workers (4%) and other medical staff (9%) provided the remaining responses.

At the time of data collection, there were fifty-six birthing hospitals across the state of Iowa. Thirty-two of these hospitals participated in our survey. Iowa hospitals with birthing units are designated with levels of care for maternal and perinatal services. Level I hospitals provide basic care, Level II hospitals provide specialty care, Level III hospitals provide subspecialty care, and Level IV provide regional perinatal care ("Redesigning Iowa's Levels of Perinatal Care," 2019). Of all Level I hospitals in Iowa, 56% participated; Level II, 36%; Level II Regional, 67%; Level II Regional Neonatal, 100%; Level III, 67%. The majority of respondents came from Level I hospitals. The majority of hospitals that responded had one response per hospital.

### **VPA Patient Education**

### Resources and Materials.

The most commonly accessed resources for VPA information were the ISU VPA newsletter, followed by the ISU VPA Program website. One respondent mentioned, "I usually call IDPH if I have any questions" and another respondent contacts "[their] hospital health information." The most commonly used materials for VPA patient education were the Comm. 107 in English and in Spanish. As this document is legally required to be shown to parents, this was expected. Other materials not listed in the survey that were provided include DNA testing material. Additionally, respondents indicated the need for low-literacy documents and more accurate Spanish translations for VPA patient education materials. The most commonly accessed materials for VPA patient education were the ISU VPA e-newsletter and the ISU VPA Program website. Other respondents indicated calling the Iowa Department of Public Health [currently Iowa HHS] for any questions about VPA processes and procedures. One respondent mentioned

providing a "'What to Bring" handout for low-literacy patients with pictures of items needed to file a paternity affidavit..." Another mentioned the need for more accurately translated Spanish materials, stating, "The translation on the Spanish materials is terrible. I try not to give it out to patients."

### Areas of Improvement

In the questionnaire, we asked, "What could be improved about your hospital's VPA process?" Forty percent of responses were related to staffing, with sixty percent of those responses specific to notary staffing improvements. Patient education improvements were the next most suggested improvement, with 24% of respondents mentioning changes to the patient education process. Sixty-seven percent of those responses were specific to identification education (i.e., patient education needed specifically related to acceptable identification required to complete a VPA).

### **Report II: VPA Process Reports**

Next, a report was developed outlining the specific VPA education processes each hospital performs from prenatal to postnatal. This report was developed for each individual hospital that fully completed the questionnaire. See Appendix B for the full report.

First, it was asked whether prenatal VPA education is typically provided (yes or no). Then, it is indicated at which point(s) VPA materials are provided to patients (upon patient admittance, before delivery of baby, after delivery of baby, upon patient discharge). Relevant time points are indicated on the report based on respondent answers from the questionnaire. The third question asks how many additional attempts hospital staff make to provide information about paternity establishment and the VPA process for patients who initially decline to fill out a VPA (0 additional attempts, 1 additional attempt, 2 additional attempts). The survey asks whether a VPA is sent home with parents who decline to complete a VPA (yes or no). Lastly, it was asked whether postnatal VPA education is typically provided (yes or no).

### **Report III: VPA Reasons Declined**

A report was completed that outlined the most common reasons, according to respondents, that unmarried parents decline to complete a VPA. Forty-six percent responded that this is due to not wanting any contact with the other parent of the child. Twenty-four percent responded this is due to not knowing who the father of the child is. Two respondents mentioned this is due to unacceptable or no documentation: "Don't have documents that are needed" and "no current photo ID." One respondent also mentioned the misconception that establishing paternity automatically charges the father of the child for child support; "It is a little of everything. They also think if they do not name the father then he will not be charged with child support."

### **Report IV: VPA Rejection Reports**

A template for a report that outlines the number of and reasons for VPA rejections was developed called the Rejection Report. A rejected VPA is one that does not fulfill one or more of the requirements set forth by Iowa HHS (e.g., proper identification, notarized document, correct dates, etc.) A rejected report means that the baby's birth certificate may not be received in a timely manner and may not include the father's name on the birth certificate, potentially impacting whether the father can take parental leave and add his baby as a dependent on his health insurance. A rejection report can be developed for any hospital that participated in our questionnaire and appeared in the rejection file received by BHS. A sample rejection report for Unity Point Health – St. Luke's Hospital for the first half of 2021, along with a key for the rejection reports, is included in APPENDIX. Box 1 includes a summary of VPA rejections, listing the total VPAs submitted, the total VPAs submitted with error(s), the rejected VPAs to error ratio, and the number of VPAs with one or multiple errors. Box 2 specifies which types of errors appeared in the data file received from BHS for a particular hospital. Errors are separated into seven types: identification, notary, formatting, incomplete, inconsistent, other, and missing information. Box 3 specifies which specific section(s) (i.e., child, father, mother, and notary) of the VPA contain missing information, if any. The box in the top right of the rejection report is a quick indicator of the rate of VPA rejection. This number is the percentage of rejected VPAs of all VPAs submitted to BHS in the given time frame.

### **Report V: VPA Rejection Reports - Notaries**

Complementary to the rejection reports, notary reports have also be developed. These reports list the names and identification numbers of the notaries who notarized VPAs for a particular hospital. Additionally, each notary is assigned a percentage of errors they were responsible for notarizing. This information may be used to target outreach for notary education specific to proper VPA completion. The notary rejection reports can be made by the VPA workgroup upon request from hospitals. Due to the sensitive nature of naming notaries and providing notary identification numbers, these reports are made available upon request and remain internal (i.e., the VPA workgroup and Iowa HHS have access to these reports and only provide individualized notary feedback to an individual should that individual request their own rejection information.)

### **Conclusions and Next Steps**

Through our community partnerships with Iowa HHS, the VPA workgroup was able to compare data collected from the VPA Hospital Survey, the BHS scorecards, and the BHS VPA rejection files. The VPA Hospital Survey provided information about the VPA patient education processes and procedures that hospitals across Iowa use when providing paternity establishment education to unmarried parents. The comparison of the VPA Hospital Survey with the BHS Scorecards and BHS VPA rejection files provided significant information about the rates of VPA rejection, the specific types of VPA errors that led to rejection, notary information, and procedural information related to each hospital's paternity establishment processes. This information may be used moving forward to track improvements in hospitals' VPA acceptance rates as the VPA workgroup provides targeted outreach to hospitals, notaries, and Iowans about

the VPA process. For example, the VPA workgroup launched a social media campaign directly to the public using Meta (formerly Facebook). Virtual trainings are provided as requested to hospital staff and notaries. Additionally, Paternity Prep Packets containing a VPA handout and practice VPA forms were developed. The purpose of these packets is to provide a list of documents needed to establish paternity via VPA in a folder that can be used to hold all relevant documents and brought to the hospital at the time of baby's birth. These packets will be launched and provided to prenatal clinics and community organizations surrounding the hospitals with the highest VPA rejection rates. Moving forward, the plan is to continue the analysis of BHS rejection files to track changes in VPA rejection rates for Iowa hospitals. Reports for specific hospitals can be developed and made available upon request.

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### Appendix A

### Report I VPA Hospital Survey: Preliminary Results Snapshot









**Iowa State University Alison C. White** 

IOWA STATE UNIVERSITY



STATE OF IOWA DEPARTMENT OF Health AND Human SERVICES



## VPA Hospital Survey

Preliminary Results Snapshot

Administration **01** 

Nurses

Who took the survey?

57% of all birthing

hospitals in Iowa

03

Which hospitals participated?

**English** 

Comm. 107

Resource Guide

**Unmarried Parents Brochure** 

**Spanish** 

Comm. 107

**Unmarried Parents Brochure** 

Frequently Asked Questions

What materials are used?

04

02

ISU VPA Newsletter

ISU VPA Website

Downloaded materials from ISU VPA Website

Which resources are accessed?

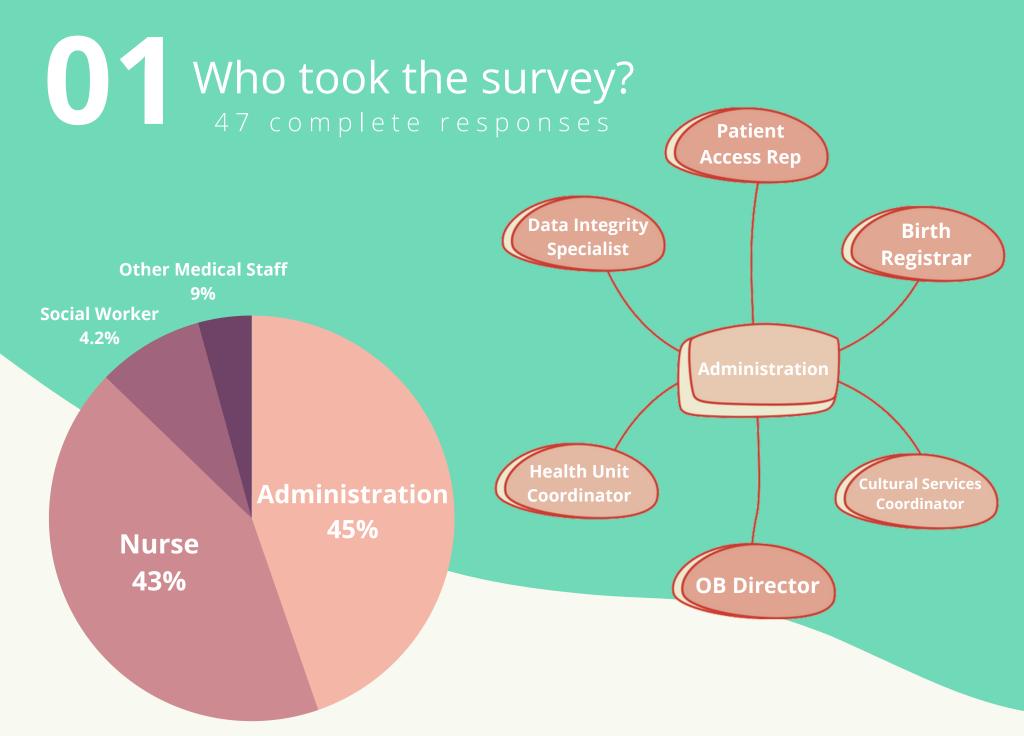
More Notaries

Patient ID Education

Procedural Improvements

05

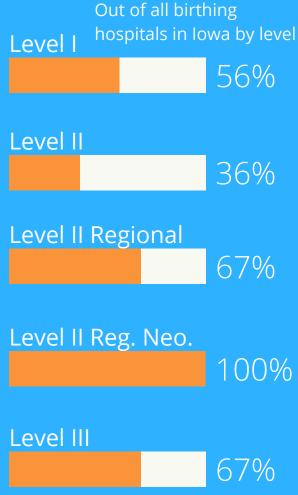
How can we help?



## Which hospitals participated?



32 of 56 birthing hospitals across the state of lowa participated in this survey.



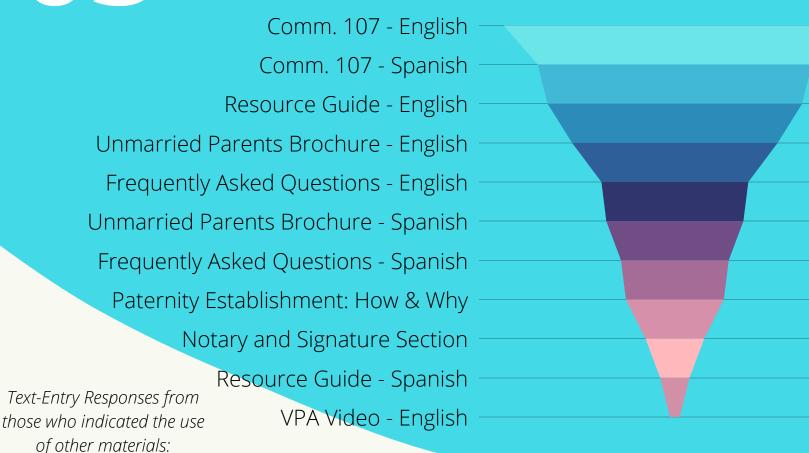
Kossuth Regional Health Center

Waverly Health Center

35

28

26



"'What to Bring'" handout for low-literacy patients with pictures of items needed to file a paternity affidavit (i.e. photo ID, proof of address)"

"The translation on the Spanish materials is terrible. I try not to give it out to patients."

## Which resources are accessed?



Text-Entry responses from those who indicated other sources:

"our hospital health information"

"I usually call IDPH if I have any questions."

### How can we help? Support for ESL

Despite 60% of staffing respondents specifying notary staffing improvements, 50% of them also indicated that they have access to enough notaries and 67% indicated that a third party notary service would not be helpful.

Materials Access 8%

Procedural 20%

Open-Ended

8%

What could be improved about your hospital's VPA process?

Staffing 40%

Patient Education 24%

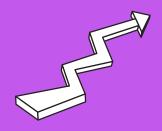
More Notaries Other Staffing

60%

ID Education

Other Education

## Next Steps



Identify steps (beginning to end) birthing hospitals complete for the Voluntary Paternity Affidavit (VPA) process with unmarried parents



Identify similarities and differences between birthing hospitals processes and use this data to compare with Bureau of Health Statistics (BHS) data to determine which birthing hospital processes yield higher rates of accepted VPAs and which yield lower rates



Identify which hospitals have VPAs rejected and the reason(s) why the VPAs rejected (using BHS data)



Identify Best Practices for birthing hospitals to follow that will yield the best VPA results

### **Appendix B**

### Report II VPA Process Reports









**VPA Process Reports** 

Iowa State University
Alison C. White









VPA Process Reports	Slide
KEY	5
Boone County Hospital, Boone, IA	6
Broadlawns Medical Center, Des Moines, IA	···· 7
Buena Vista Regional Medical Center, Storm Lake, IA	8
CHI Health Mercy Council Bluffs, Council Bluffs, IA	9
Floyd Valley Hospital, Le Mars, IA	10
Genesis Medical Center, Davenport, IA	11
Greater Regional Health, Creston, IA	12
Iowa Specialty Hospital, Clarion, IA	13
Kossuth Regional Health Center, Algona, IA	
Mary Greeley Medical Center, Ames, IA	IOWA STATE UNIVERSITY Voluntary Paterality Affida

Mercy Hospital, Iowa City, IA	16
MercyOne Des Moines Medical Center, Des Moines, IA	
MercyOne Dubuque, Dubuque, IA	18
MercyOne Newton Medical Center, Newton, IA************************************	19
MercyOne North Iowa, Mason City, IA	20
MercyOne Waterloo Medical Center, Waterloo, IA	21
Myrtue Medical Center, Harlan, IA	22
Regional Health Services of Howard County, Cresco, IA ••••••	23
Regional Medical Center, Manchester, IA	24
Sanford Sheldon Medical Center, Sheldon, IA	IOWA STATE VOLUNIVERSITY



Shenandoah Medical Center, Shenandoah, IA	26
Sioux Center Health, Sioux Center, IA	
Spencer Hospital, Spencer, IA	
Unity Point Health - Finely Hospital, Dubuque, IA	
Unity Point Health - Grinnell Regional Medical Center, Grinnell, IA ***********************************	30
Unity Point Health - Methodist West, West Des Moines, IA************************************	31
Unity Point Health - St. Luke's Hospital, Cedar Rapids, IA 3	32
Unity Point Health - St. Luke's, Sioux City, IA 3	33
Unity Point Health, Bettendorf, IA	34
University of Iowa Hospitals & Clinics / Stead Family Children's Hospitals, Iowa City, IA • • 3	35
Waverly Health Center, Waverly, IA	36









### **VPA Process Report Key**

"Any prenatal resources we provide include information about paternity establishment."

**Prenatal VPA** 

**Education** 

Yes

No

"At what point during a patient's stay do you typically provide VPA materials?"

"For patients who decline, how many more attempts does hospital staff make to provide information about paternity establishment and the VPA process?"

"If an unmarried parent initially declines to fill out the VPA form, is the VPA form still included in the materials the unmarried parent is given?"

"Any postnatal resources we provide include information about paternity establishment."





02



Upon Patient



Upon Patient
Admittance
Before Delivery
of Baby

After Delivery
of Baby

Upon patient Before Delivery 

•

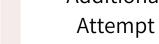


After Delivery



Discharge





03

04



05



**Additional Attempts** 

Additional

**Affidavit Sent Home** 

Yes

No

**Postnatal VPA Education** 

Yes

No



**BLANK** 

Pink highlight indicates hospital's response

Blank indicates 1) "I don't know" or 2) no response given



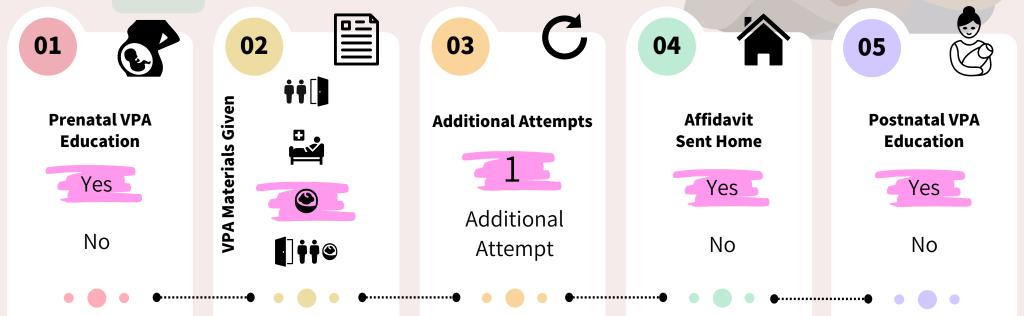




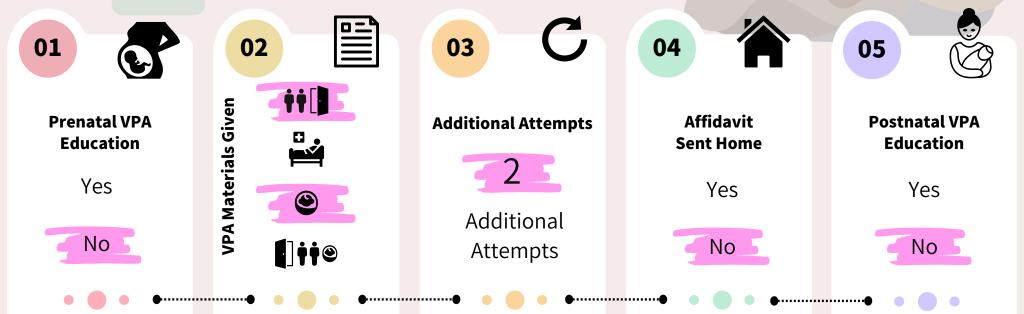
# Boone County Hospital Boone, IA VPA Process Report

01 02 03 04 05 ††[ **VPA Materials Given Affidavit Prenatal VPA Additional Attempts Postnatal VPA Education Sent Home Education** Yes Yes Yes Additional No No No Attempt

## Broadlawns Medical Center Des Moines, IA

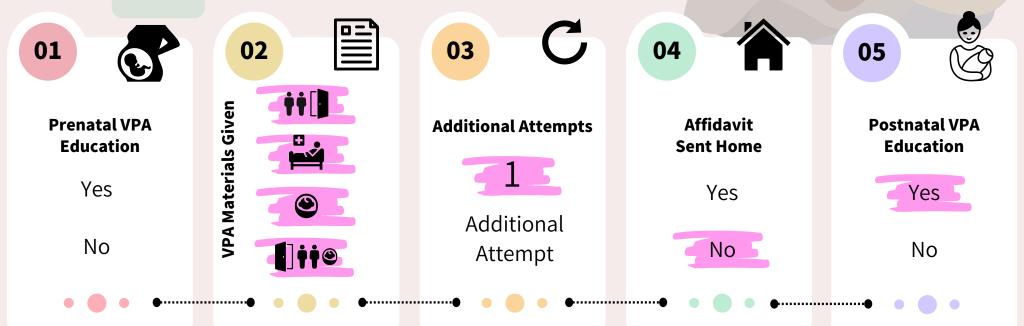


## Buena Vista Regional Medical Center Storm Lake, IA

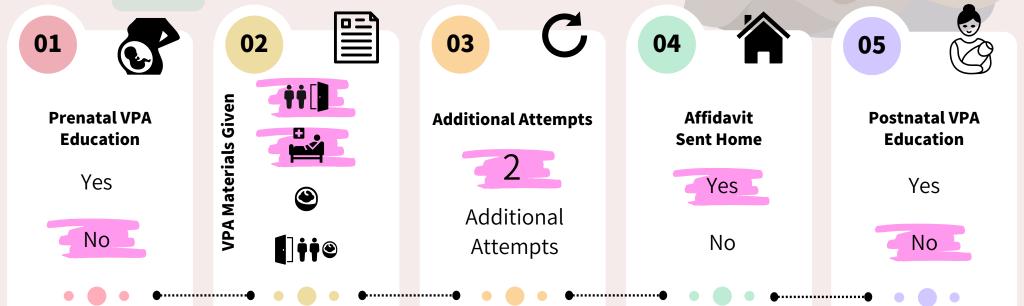


## **CHI Health Mercy Council Bluffs**

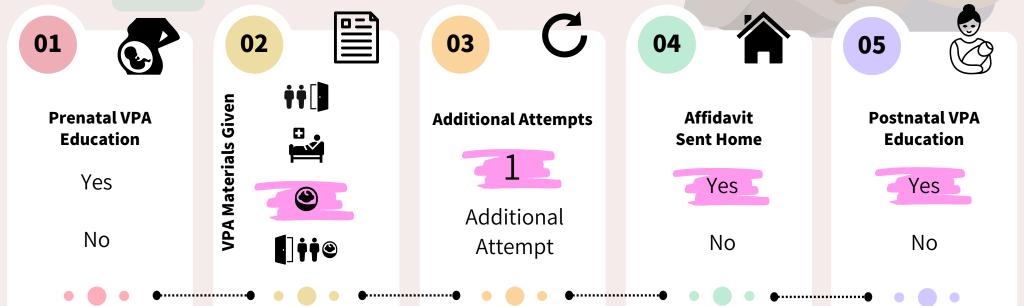
Council Bluffs, IA



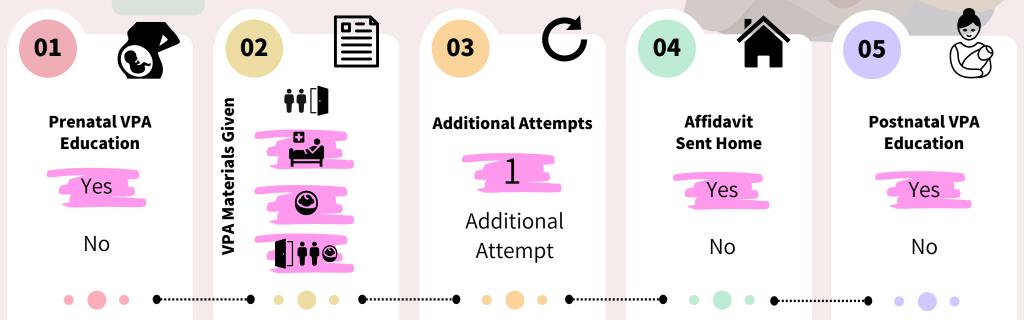
## Floyd Valley Hospital Le Mars, IA



## Genesis Medical Center Davenport, IA



## Greater Regional Health Creston, IA

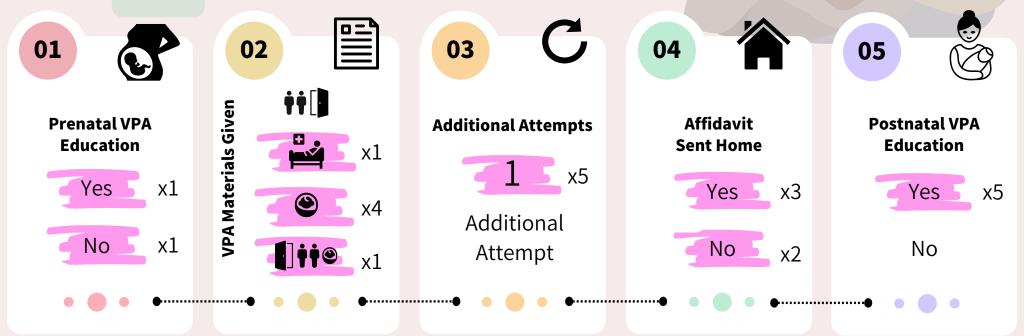


# Iowa Specialty Hospital Clarion, IA VPA Process Report

02 03 04 01 05 ††[ **VPA Materials Given Affidavit Prenatal VPA Additional Attempts Postnatal VPA Education Sent Home Education** Yes Yes Yes Additional No No No []††@ Attempts

## Kossuth Regional Health Center

Algona, IA

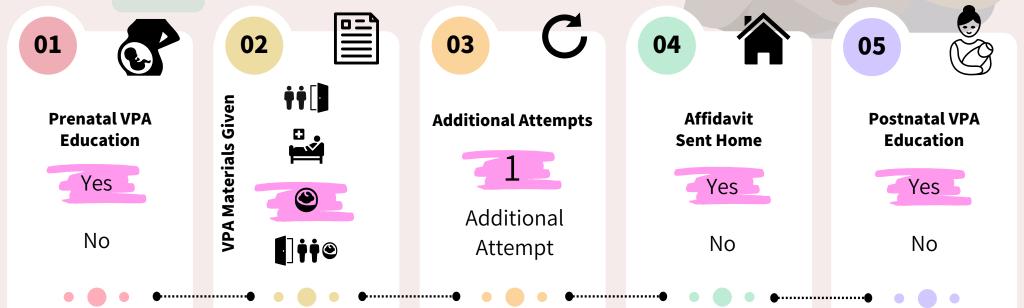




# Mary Greeley Medical Center Ames, IA VPA Process Report

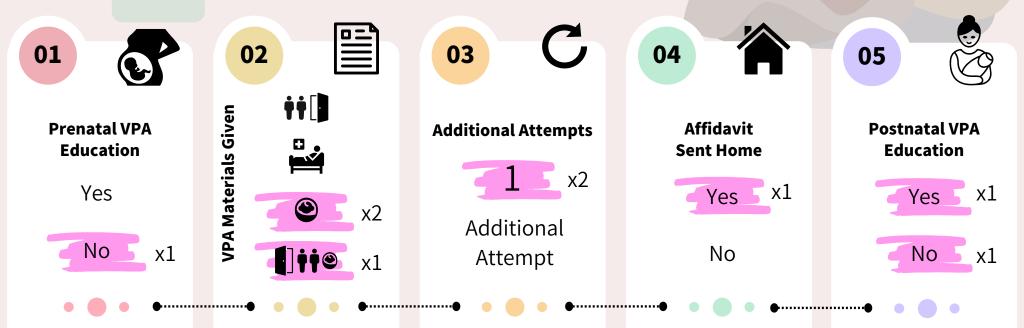
02 04 01 03 05 ††[ **VPA Materials Given Affidavit Prenatal VPA Additional Attempts Postnatal VPA Education Sent Home Education** Yes Yes Yes Additional No No No **[**]††@ Attempts

# Mercy Hospital lowa City, IA VPA Process Report



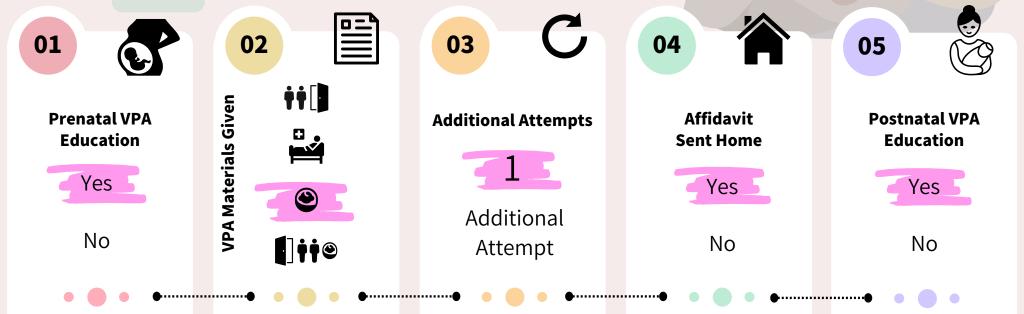
## MercyOne Des Moines Medical Center

Des Moines, IA

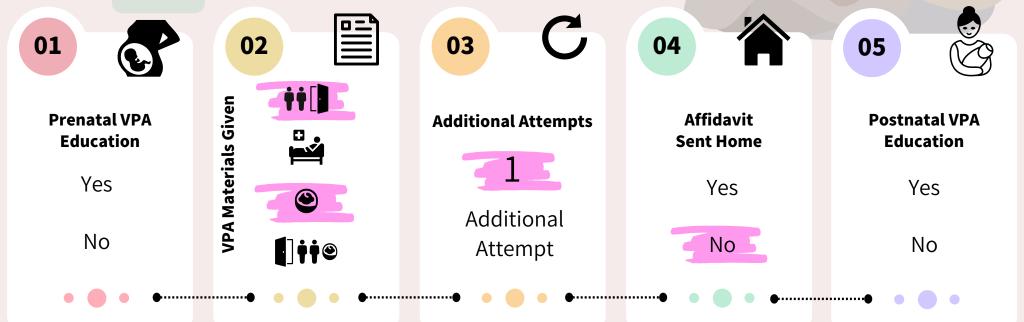




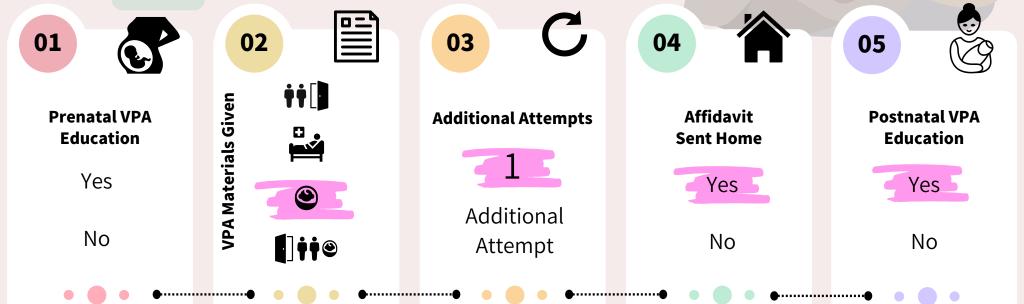
## MercyOne Dubuque Dubuque, IA



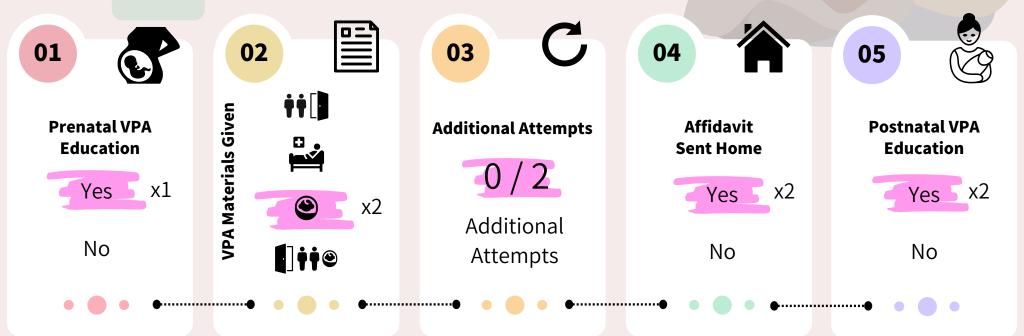
## MercyOne Newton Medical Center Newton, IA



# MercyOne North Iowa Mason City, IA

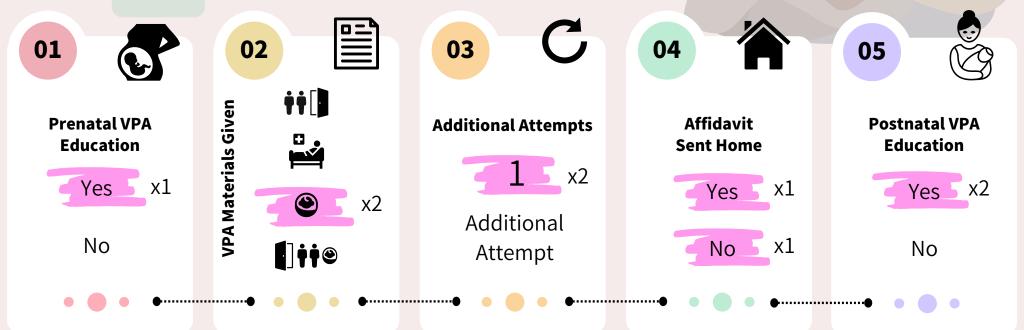


# MercyOne Waterloo Medical Center Waterloo, IA



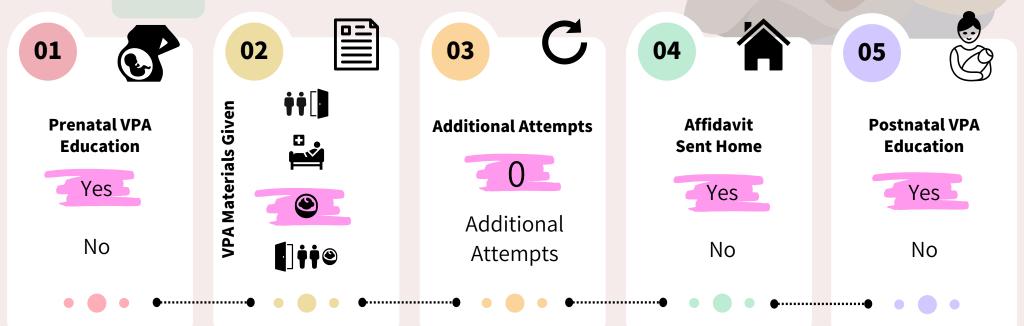


# Myrtue Medical Center Harlan, IA VPA Process Report



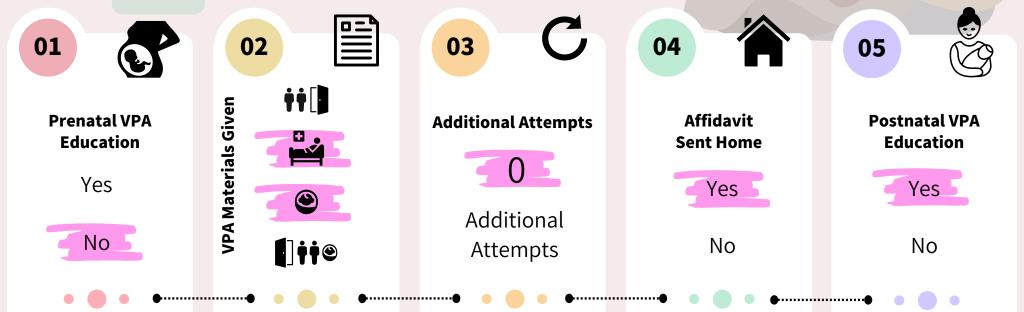


## Regional Health Services of Howard County Cresco, IA

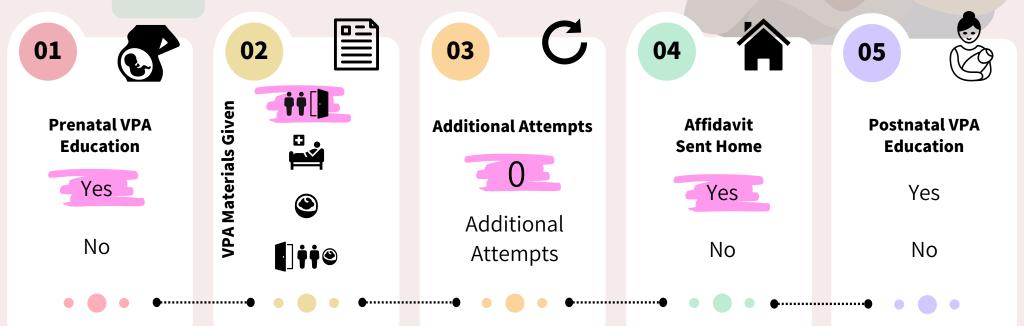


## Regional Medical Center

Manchester, IA

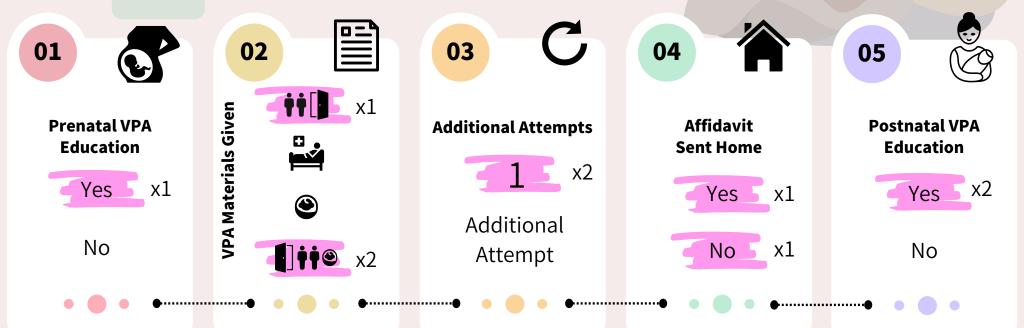


## Sanford Sheldon Medical Center Sheldon, IA



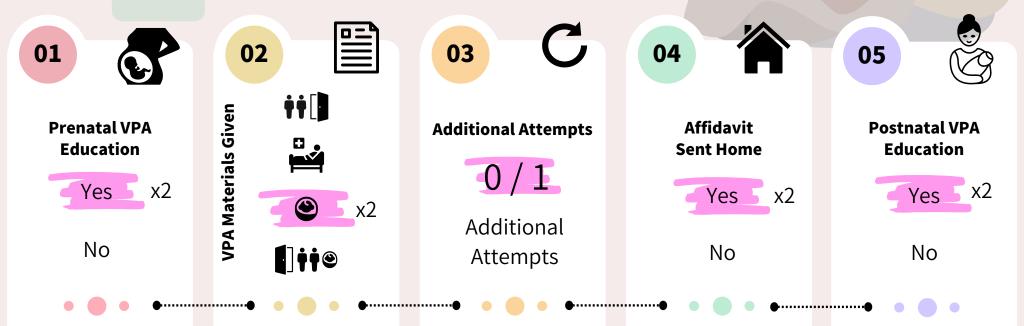


# Shenandoah, IA



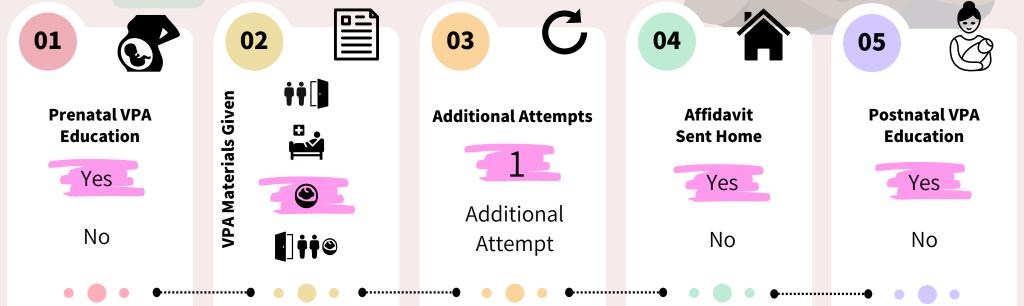


### Sioux Center Health Sioux Center, IA VPA Process Report

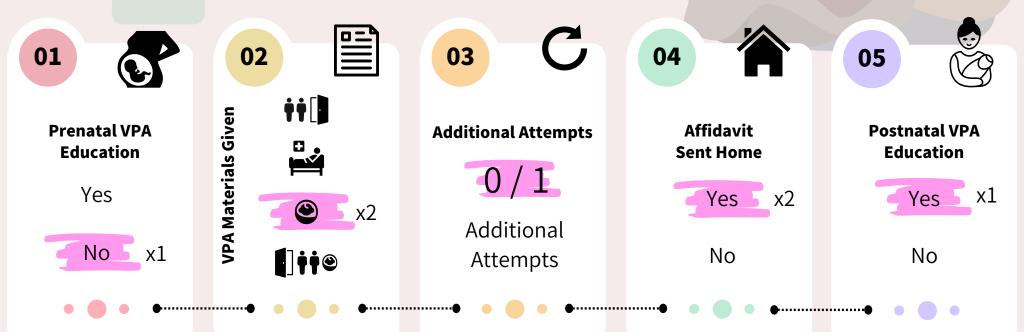




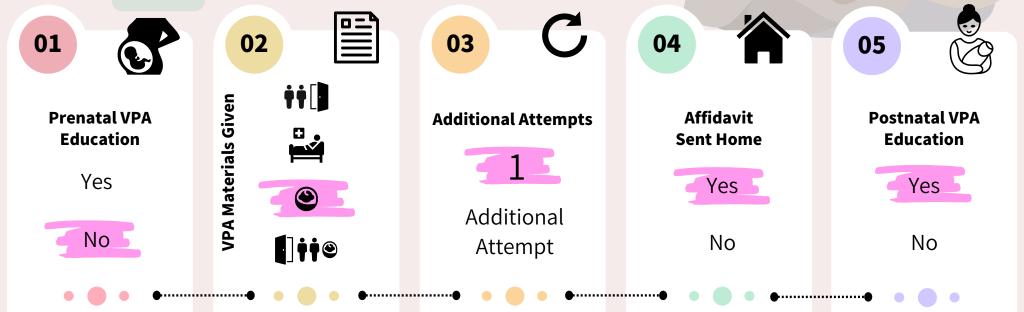
# Spencer Hospital Spencer, IA VPA Process Report



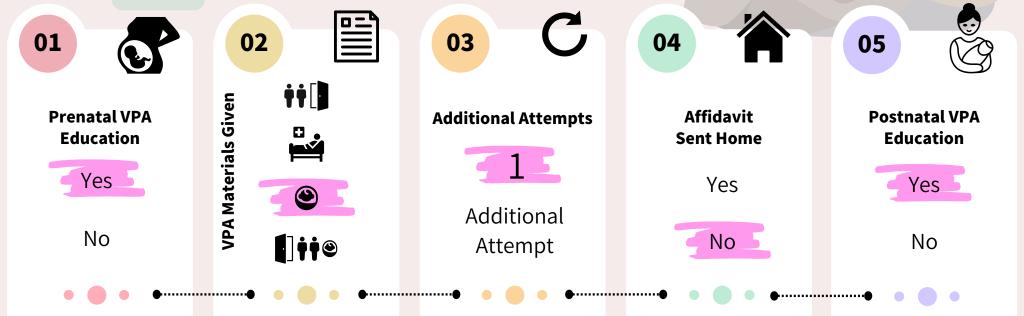
# Unity Point Health - Finley Hospital Dubuque, IA



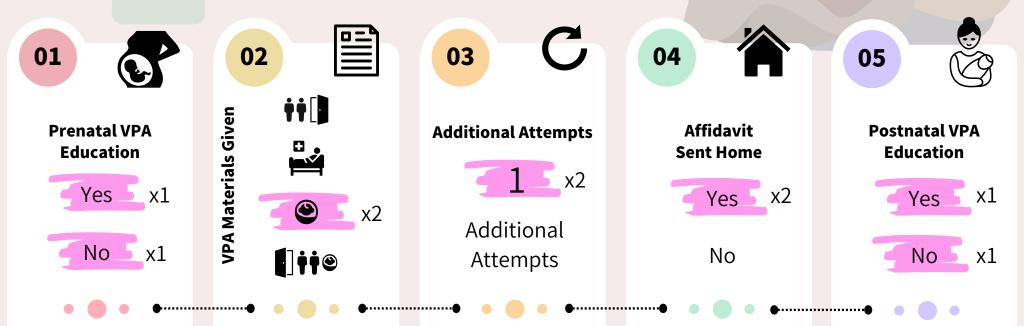
## Unity Point Health - Grinnell Regional Medical Center Grinnell, IA



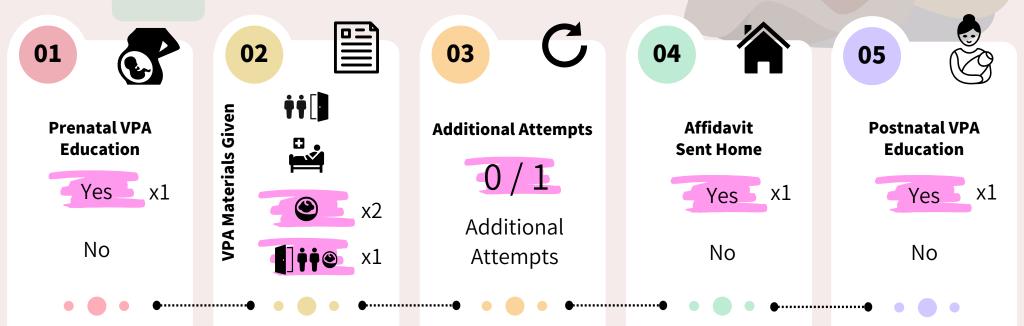
# Unity Point Health - Methodist West West Des Moines, IA VPA Process Report



# Unity Point Health - St. Luke's Hospital Cedar Rapids, IA VPA Process Report

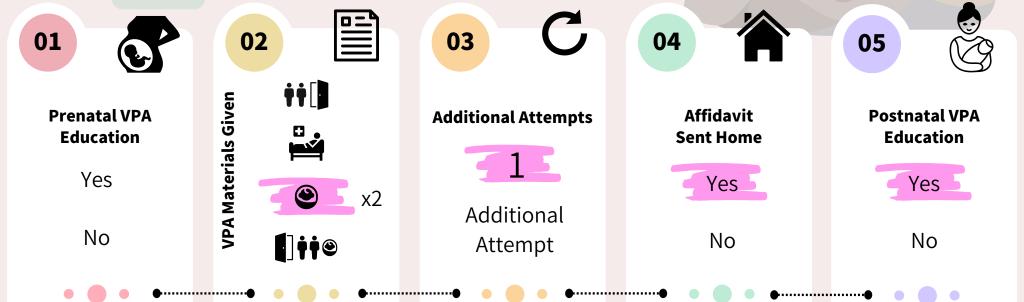


# Unity Point Health - St. Luke's Sioux City, IA VPA Process Report

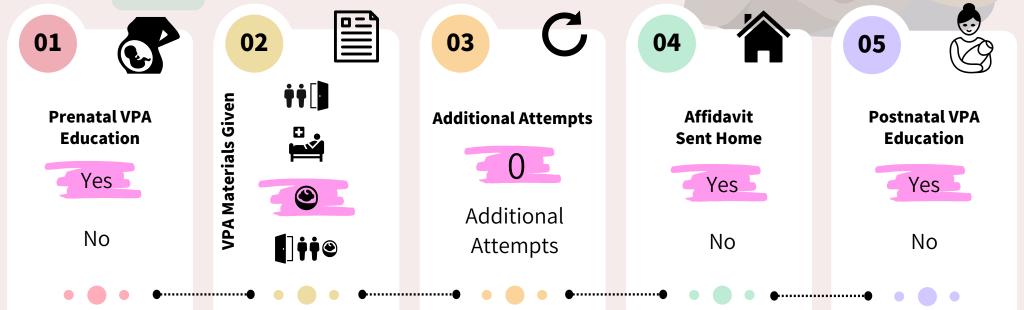




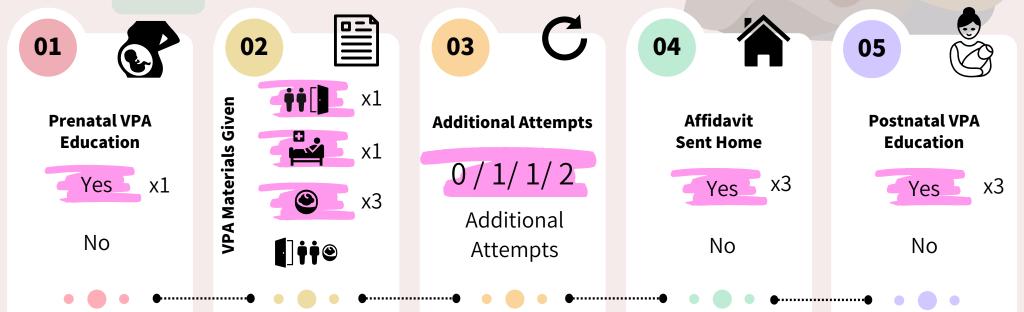
# Unity Point Health Bettendorf, IA VPA Process Report



# University of Iowa Hospitals & Clinics / Stead Family Children's Hospitals Iowa City, IA VPA Process Report



# Waverly Health Center Waverly, IA VPA Process Report





### **Appendix C**

Report III VPA: Reasons Declined









childwelfareproject.hs.iastate.edu/vpa



# VPA: Reasons Declined

Alison C. White lowa State University



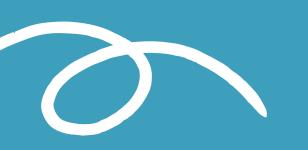
This report includes information about the reasons parents give hospital staff for declining to fill out a Voluntary Paternity Affidavit (VPA) while in the hospital. The hospitals included in this report are those which are top priority for outreach.



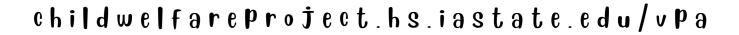








# Top5 Hospitals for Targeted Outrech







- 1.\*Unity Point Health Iowa Methodist Medical Center
- 2. Unity Point St. Luke's, Sioux City
- 3. University of Iowa Hospitals and Clinics
- 4. Unity Point St. Luke's, Cedar Rapids
- 5. UnityPoint Health Methodist, West Des Moines









childwelfareProject.hs.iastate.edu/vPa





Question

What is the most common reason unmarried parents give for declining to fill out the VPA form?



# Unity Point St. Luke's Gioux City



Response Text Position

Other No current photo ID Birth Registrar

I don't know Unit Secretary



# University of lowa Hospitals and Clinics







Response Position

I don't know

Administration



## Unity Point St. Luke's Cedar Rapids







Response Position

Not sure who the father is

Administration

One or both parents wants genetic/paternity testing before establishing paternity

Birth Registration Specialist



# UnityPoint Health Methodist West Des Moines









Response Position

Do not want any contact with the other parent of the child

Data Specialist





## Reasons Declined: full Sample

One or both parents wants genetic/paternity before establishing paternity (4)

Other (3)

I don't know (7)

Do not want any contact with the other parent of the child (21)

Not sure who the father is (11)



## Reasons Declined: Other

One or both parents wants genetic/paternity before establishing paternity

(4)

Other (3)

I don't know (7) Do not want any contact with the other parent of the child (21)

Not sure who the father is (11)

It is a little of everything. They also think if
they do not name the father then he will not
be charged with child support

2 Don't have documents that are needed

3 No current photo ID



### **Appendix D**

### Report IV VPA Rejection Reports



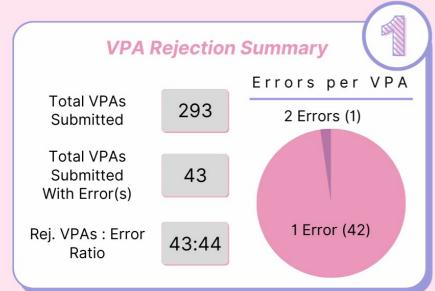


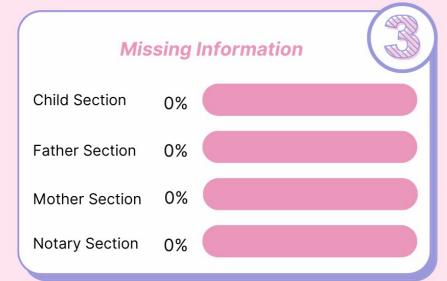


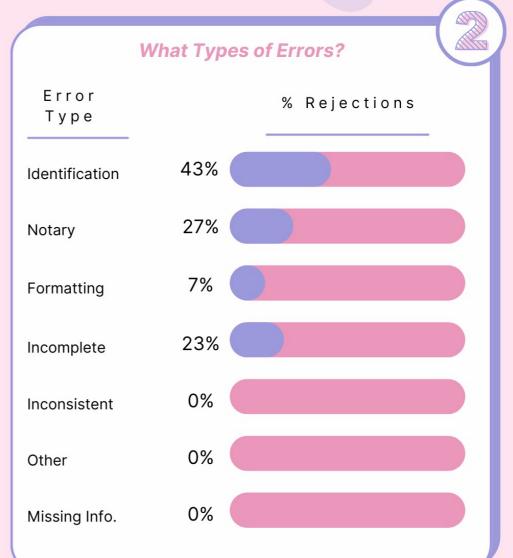


### UnityPoint Health - St. Luke's Hospital Sioux City

### 2021 Period 1 Rejection Report







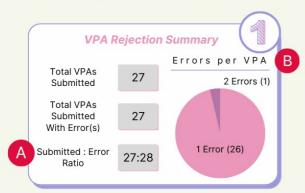


<sup>\*</sup>Interpret with awareness that data received from BHS may not accurately reflect ALL rejected VPA forms.

Reports are developed based only on data received.\*

### VPA Rejection Report Key

### Find Date Range of Included Data Here



- This shows the number of total VPAs submitted against the total number of VPA errors found. There may be more than one error on a form, so the number of total errors may be greater than the number of total VPAs.
- There may be several errors on a single VPA. This chart shows how many VPAs have the corresponding number of errors. For example, this chart shows that 26 VPAs had one error each, and 1 VPA had two errors.

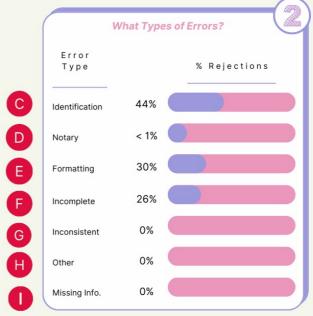
	Mis	sing Information	
	Child Section	0%	
K	Father Section	0%	
	Mother Section	0%	
M	Notary Section	0%	

- Of errors reported as "Missing Information," this is the percentage of missing information errors from the child section of the VPA
- Of errors reported as "Missing Information," this is the percentage of missing information errors from the father section of the VPA
- Of errors reported as "Missing Information," this is the percentage of missing information errors from the mother section of the VPA
- Of errors reported as "Missing Information," this is the percentage of missing information errors from the notary section of the VPA

N Percentage of rejected VPAs of all VPAs submitted to BHS

Can also reflect as percentage of accepted VPAs (95% Acceptance Rate) - hesitate to use this because data seems inconsistent. Feel more comfortable giving wiggle room in the error rate versus the acceptance rate. 95% Acceptance may discourage from improvement as 95% reads "great"





- Percentage of VPAs with rejections: Additional IDs Required, Expired IDs, ID Different From Form, ID Required
- Percentage of VPAs with rejections: Notary Information Incomplete, Wrong Notary Dates
- Percentage of VPAs with rejections: Altered Form, Not On Archival Paper
- Percentage of VPAs with rejections: Dates Missing, Divorce Decree Required, Incomplete PA, Mother Statement Incomplete
- G Percentage of VPAs with rejections: Provided Information Does Not Match, Added Mother's Last Name
- Percentage of VPAs with rejections: Other
- Percentage of VPAs with rejections: Missing Information SEE SECTION 3 (LEFT)



### **Appendix E**

### Report V VPA Rejection Reports - Notaries









## UnityPoint Health - St. Luke's Hospital Sioux City

### 2021 Period 1 Rejection Report - Notaries

Percentage Reflects Amount of Total Errors Each Notary Was Responsible For

	Notary Errors
<u>Notary</u>	Percent Errors
ВВ	30%
LS	25%
ML	11%
LH	7%
RM	7%
HP	5%
KG	5%
AW ES JR LD MM	2%

### Appendix F

### 2021 Hospital Survey









# **VPA Hospital Survey**

Start of Block: Block 4
Q1 Thank you for participating in this survey. It is part of a collaboration with Iowa State University, Iowa Department of Public Health, and Iowa Department of Human Services. This survey will help us gather feedback from hospital personnel about their current procedures, strengths, and obstacles surrounding patient education related to paternity establishment. The survey will take about 10 minutes to complete. Results will be reported at a group level. No individual names will be used in any reports.  End of Block: Block 4
Start of Block: Default Question Block
O2 If you would like to be cligible for a CEO OO gift gord, places enter your first name, lost name.
Q2 If you would like to be eligible for a \$50.00 gift card, please enter your first name, last name, and email address below. This information will be detached from all other responses and will only be used to contact you regarding compensation, if eligible.  Participants must fully complete the survey to be eligible.
and email address below. This information will be detached from all other responses and will only be used to contact you regarding compensation, if eligible.
and email address below. This information will be detached from all other responses and will only be used to contact you regarding compensation, if eligible.  Participants must fully complete the survey to be eligible.
and email address below. This information will be detached from all other responses and will only be used to contact you regarding compensation, if eligible.  Participants must fully complete the survey to be eligible.  First Name (4)
and email address below. This information will be detached from all other responses and will only be used to contact you regarding compensation, if eligible.  Participants must fully complete the survey to be eligible.   First Name (4)  Last Name (5)

Q3 Please enter your hospital's name.	
Q4 Please enter your hospital's city.	
Q5 Please enter your position at your hospital.	
O Administration (1)	
O Doctor (2)	
O Nurse (3)	
O Social Worker (4)	
Other (please list) (5)	
Page Break ————————————————————————————————————	

# Q6 Please answer the following questions about Voluntary Paternity Affidavit (VPA) Materials. On average, how many VPA forms are given to unmarried parents to complete at your hospital per month? (Please count 1 form to one family, even if it took them multiple forms to fill it out properly). 0-5 (1) O 6-10 (2) O 11-15 (3) 0 16-20 (4) **21-25** (5) O 26+ (6) O Don't know (7) Q7 On average, how many VPA forms does your hospital submit to the Bureau of Health Statistics per month? 0-5 (1) O 6-10 (2) O 11-15 (3) 0 16-20 (4) O 21-25 (5) O 26+ (6)

O Don't know (7)

Page Break ———

Q8 Please ma	rk all materials your hospital uses for unmarried patient education purposes.
	Comm. 107 - <b>English</b> (1)
	Comm. 107 - <b>Spanish</b> (2)
	Unmarried Parents Brochure - <b>English</b> (3)
	Unmarried Parents Brochure - <b>Spanish</b> (4)
	Frequently Asked Questions - English (5)
	Frequently Asked Questions - <b>Spanish</b> (6)
	Resource Guide - English (7)
	Resource Guide - Spanish (8)
	VPA Video - <b>English</b> (9)
	VPA Video - <b>Spanish</b> (10)
	Paternity Establishment: How & Why (11)
	Notary and Signature Section (12)
	None of these (13)
	I am unsure where to access these materials (14)
	I have never seen these materials (15)
	Other materials not listed above (please list) (16)

				-	 	 	-	 	-	_	_	 -	_	-	_	_	_		-	 	-	-	-	-	_	-	 -	-	_	-	 	 . –	_	_	-	 	 -	_	-	-
Р	age	B	re	ak		_			_									_														_		_					_	_

previous que	stion? Please use the space provided to further expla	in, if needed.
	Upon patient admittance (1)	
	Before delivery of baby (2)	
	After delivery of baby (3)	
	Upon patient discharge (4)	
Page Break		

Q9 At what point during a patient's stay do you typically provide the materials indicated in the

Q10 Please s	select all of the following resources you access at least once per month:
Program	Access the Iowa State University (ISU) Voluntary Paternity Affidavit (VPA) website (1)
	Download materials from the website for use (2)
	Email the ISU VPA program with questions (3)
	Fill out and submit materials order forms through the ISU VPA program (4)
	Read the ISU VPA e-newsletter (5)
	Visit the ISU VPA YouTube channel (6)
(please sp	Contact other sources with questions about the Voluntary Paternity Affidavit pecify) (7)
End of Block	x: Default Question Block
Start of Bloc	k: Block 1
Page Break	

Q11  Please answer the following questions about VPA patient education. Please respond according to what your hospital <i>typically</i> does.  Any prenatal resources we provide include information about paternity establishment.	
O Almost always true (1)	
○ Usually true (2)	
○ Rarely true (3)	
O I don't know (4)	

Page Break —

Q12 Any <b>postnatal</b> resources we provide include information about paternity establishment.
O Almost always true (1)
O Usually true (2)
O Rarely true (3)
O I don't know (4)
Page Break ————————————————————————————————————

Q13 Unmarried parents in the birthing unit are briefed on the basics of the voluntary paternity affidavit at least one time during their stay.
O Almost always true (1)
O Usually true (2)
Rarely true (3)
○ I don't know (4)
Page Break ————————————————————————————————————

Q14 We define "legal father" and "paternity establishment" for all unmarried parents during their stay.
O Almost always true (1)
O Usually true (2)
O Rarely true (3)
O I don't know (4)
Page Break ————————————————————————————————————

Q15 We thoroughly explain the benefits of paternity establishment for unmarried parents during their stay.
O Almost always true (1)
O Usually true (2)
O Rarely true (3)
O I don't know (4)
Page Break
i age break

Q16 We explain to unmarried parents exactly now to fill out the VPA form during their stay.
O Almost always true (1)
O Usually true (2)
O Rarely true (3)
O I don't know (4)
Page Break ————————————————————————————————————

notary on site to assist them during their stay.
O Almost always true (1)
O Usually true (2)
O Rarely true (3)
O I don't know (4)
Page Break ————————————————————————————————————

Q17 We explain to unmarried parents where and how to access a notary, even if there is not a

Q18 We explain to unmarried parents where and how to submit a VPA form, even if the form is not completed during their stay.
O Almost always true (1)
O Usually true (2)
O Rarely true (3)
O I don't know (4)
Page Break ————————————————————————————————————

Q19 When providing education about paternity establishment to unmarried heterosexual couples with both parties present, which parent do you typically address?
O Mother (1)
C Father (2)
○ We address both parents equally (3)
Page Break ————————————————————————————————————

Q20 How often do hospital staff walk unmarried parents through filling out the entire VPA form by offering beginning-to-end guidance?
O Almost always (1)
O Sometimes (2)
O Almost never (3)
O I don't know (4)
Dogo Prook
Page Break ————————————————————————————————————

Q21 What determines whether an unmarried parent receives beginning-to-end guidance filling out the VPA form? Please explain below.												
Page Break ————————————————————————————————————												

Q22 If an unmarried parent initially declines to fill out the VPA form, is the VPA form still included in the materials the unmarried parent is given?
○ Yes, always (1)
O Yes, sometimes (2)
O No (3)
O I don't know (4)
Dava Drank
Page Break ————————————————————————————————————

form?
O Do not think there is a benefit to establishing paternity (4)
O Do not want any contact with the other parent of the child (2)
O Not sure who the father is (1)
One or both parents wants genetic/paternity testing before establishing paternity (8)
O Too stressed, will complete later (3)
Other (5)
O I don't know (7)
Page Break ————————————————————————————————————

Q23 What is the most common reason unmarried parents give for declining to fill out the VPA

Other							
Q24 You answe	orod "othor"	to the provious	e guartian Pla	aso write the	most comm	on rosson	
unmarried pare		•	•		most comm	Jirreason	
Page Break -							

If What is the most common reason unmarried parents give for declining to fill out the VPA form? =

Display This Question:

establishment and the VPA process for unmarried parents who initially decline to establish paternity or are unsure at its first mention?
O more attempts (1)
O 1 more attempt (2)
O 2 more attempts (3)
O More than 2 attempts (4)
Page Break ————————————————————————————————————

Q25 How many more attempts does hospital staff make to provide information about paternity

Q26 What is the <b>most common</b> reason unmarried parents don't finish completing the VPA form while in the hospital?
Father does not have acceptable IDs (2)
○ Father is not at the hospital (3)
O Mother does not have acceptable IDs (1)
O Notary is not available (4)
O Too stressed, will complete later (5)
Other (6)
O I don't know (7)
B B .
Page Break ————————————————————————————————————

If Wh = Oth	s the	то	st c	omi	mon	rea	son	un	ma	rrie	ed p	oare	ents	s do	on't	t fir	nist	ı cc	mp	olet	ing	the	e V	PA	fo	rm	wh	ile	in
7 You narrie							•																mn	noi	n r	·ea	sor	า	
 	 																								_				

Display This Question:

Page Break ———

rm?	٦
○ Yes (1)	
○ No (2)	
O I don't know (3)	
nd of Block: Block 1	
art of Block: Block 2	
age Break	

Q29 Please answer the following questions about notary services. How many notaries are in your hospital?
0 - our hospital has no notaries in-house (1)
1 notary (2)
2-4 notaries (3)
○ 5-9 notaries (4)
O 10 or more notaries (5)
Page Break ————————————————————————————————————

Q30 How many notaries are typically available for the birthing unit?
0 - our hospital has no notaries in-house (1)
O 1 notary (2)
O 2-4 notaries (3)
O 5-9 notaries (4)
O 10 or more notaries (5)
Page Break ————————————————————————————————————

Q31 What is	the primary role of the notaries in your hospital? Select all that apply.
	Administrative staff (1)
	Doctor (2)
	Nurse (3)
	Social worker (4)
	Other (please list) (5)
Page Break	

Q32 Are there ever cases in which patient discharge is delayed due to the availability of a notary?
○ Yes (1)
O No (2)
O I don't know (3)
Skip To: Q35 If Are there ever cases in which patient discharge is delayed due to the availability of a notary? = No
Skip To: Q35 If Are there ever cases in which patient discharge is delayed due to the availability of a notary? = I don't know
Page Break

Q33 Does this happen often?			
○ Yes (1)			
O No (2)			
O I don't know (3)			
Page Break ————			

Q34 Please explain how you	handle these situations.	
Page Break ————		

unit?		
○ Yes (1)		
O No (please explain) (2)		 
Page Break ————		

Q35 Do you feel your hospital has enough notaries to keep up with demand in your birthing

	notary service that provides additional on-site notaries to the birthing unit, who are with your hospital, be helpful to your team?
O Yes (	1)
O No (2	
O Maybe	e (3)
End of Block	x: Block 2
Start of Bloc	k: Block 3
	individuals whose first language is <b>not</b> English supported throughout the paternity d VPA form process? Select all that apply.
	Family member (1)
	Google Translate (2)
	Language Line (3)
	Staff member (4)
	Other (please explain) (5)
Page Break	

	Q38 Did COV visitor limits a this handled?	ffect the fath	ner's presen	ice and ab	ility to sign	the VPA	•	•	
Page Break	Page Break						 		 

Q39 What works well about the VPA process your hospital has in place?	
Page Break —————————————————————	

Q40 What could be improved about your hospital's VPA process?	
	-
Page Break ————————————————————————————————————	_

Q41 Please uthat you would		dd any	additio	onal co	mme	nts rel	ated t	to VP	A pro	oce	dure	es	
·													
Page Break													_

-	of the patients in your hospital's birthing unit mentioned difficulties accessing the ices due to the closure of birthing units across Iowa? Select all that apply.
	Prenatal services (1)
	Labor and delivery services (2)
	Postnatal services (3)
	Other (please specify) (5)
	⊗I don't know (4)
Skip To: Q44 If the fo = I don	Have any of the patients in your hospital's birthing unit mentioned difficulties accessing 't know
Page Break	

			_
			_
 	 		_

cases that require follow-up or clarification of responses and is an optional step. This information will not be shared with your hospital and is for lowa State University's reference only. Entering this information means that you consent to lowa State University reaching out to you for clarification of responses, if needed.							
O Name (1)							
O Email (2)							

End of Block: Block 3

Q44 Please enter your name and contact information. This information will only be used in

## Appendix G

## Voluntary Paternity Affidavit









Bureau of Health Statistics & Vital Records

### VOLUNTARY PATERNITY AFFIDAVIT

#### **Purpose**

Signing and filing this Voluntary Paternity Affidavit establishes a legal relationship between a father and child when the biological father was not married to the child's mother. Signing and filing this form:

- Legally establishes the biological father's paternity; and
- Allows the father's name to be added to the child's birth certificate.

#### Rights and responsibilities

Signing this form is voluntary. Legal paternity establishment provides many benefits for you and the child. It also creates rights and responsibilities, and means the biological father is committing to support the child. This Voluntary Paternity Affidavit is a legal action. Once it is processed, you must get a court order to change any information that you provided on the form.

- Your rights, responsibilities, and benefits are explained in the informational material provided with this affidavit. Read this information carefully before you sign this affidavit. Ask for assistance if you do not understand the consequences of signing this affidavit.
- By signing this affidavit, you are saying that you have read and understand your rights and responsibilities, and that you have provided true and accurate information that is legally binding.
- If you are unsure who the biological father is, you should not sign this document and you should have a genetic test. To obtain a genetic test, contact your local child support office or seek genetic testing services on your own. Upon filing the Voluntary Paternity Affidavit, the Iowa Department of Public Health will update the birth certificate with the father's name and information.
- Either person listed on the Voluntary Paternity Affidavit as Mother or Father may cancel this affidavit by completing and filing a Rescission of Paternity Affidavit form with the Bureau of Health Statistics. You have 60 days from the date of the last notarized signature on this form, or until a court order is entered regarding this child, whichever is the earlier. Contact the bureau at (515) 281-4944 and ask for the paternity clerk to obtain a rescission form.

#### Instructions for parents

- There is no fee for filing a Voluntary Paternity Affidavit and this form may be completed for a child of any age.
- Type or <u>print</u> legibly in dark ink. Complete all items. Ask for a new form if you make a mistake. Do not send
  in a photocopy of this form. Affidavits that are not signed on the original form supplied by the lowa Department of
  Public Health, or that contain blanks, cross-outs, correction fluid, or erasures may be rejected.
- Both the Mother and Father completing this form must show <u>current</u>, <u>government-issued photo identification</u> and sign this form in front of a notary public. All signatures must be clear and legible.
- File this completed, notarized form with the lowa Department of Public Health, Bureau of Health Statistics.

When you sign this form, you may also change your child's last name from what is on your child's birth certificate. lowa law gives you only three choices: 1) leave the child's last name the same as on the current birth certificate; 2) change the child's last name to the same as the father's last name; or 3) if the child's last name is currently the same as the mother's, add the father's last name to it for a 2-word hyphenated last name. If you want to change the last name and both parents agree, write your child's new last name in the designated box. If you do not want to change the last name, write your child's current last name in the box. If you do not complete this field, the child's last name will stay the same as it is on the current birth certificate.

#### Mail this completed form to:

You <u>must</u> include the completed, notarized form, a clear photocopy of <u>both</u> parents' current government-issued photo I.D.s, <u>and</u> any other appropriate attachments.

Iowa Department of Public Health Bureau of Health Statistics, Paternity Clerk Lucas State Office Building, 1<sup>st</sup> Floor 321 E. 12<sup>th</sup> Street Des Moines, IA 50319

Parents are responsible for returning certified copies of the child's birth certificate in order to get a replacement if the certificate was issued before the paternity affidavit was processed. Changes other than corrections of obvious typographical errors made by the Bureau of Health Statistics will require a court order.

### IOWA DEPARTMENT OF PUBLIC HEALTH

### **VOLUNTARY PATERNITY AFFIDAVIT**

For State Vital Records Office Use Only

Docket # \_\_\_\_

Certificate # \_\_\_\_

Facility Code # \_\_\_\_

Date Completed \_\_\_\_

PLEASE READ THE OTHER SIDE OF THIS FORM BEFORE COMPLETING THE FOLLOWING INFORMATION. PLEASE ANSWER ALL ITEMS.

	CHILD'S INFORMATION AS SHOWN ON BIRTH CERTIFICATE:				Was child one of a multiple birth (twins, tripletsetc.)? ☐ Yes ☐ No					
اد	Child's Name F	irst	Middle	If none, c	heck box 🗖	Last (surname)			Suffix (Jr., II, III, IV, V)	
CHILD	Sex ☐ Female ☐ Male	Birth Date (Mont	h, Day, Year)	City, C	ounty and S	tate of Birth	e of Birth Name of Hospital or Ad			
CHILD'S LAST NAME (surname) AFTER PATERNITY – Do not leave blank. You may keep it the same as on the birth certificate, change it to the father's, or add the father's last name to it.										
	Father's Name First M		Middle	Middle If none, check box □		Last (surname)		Suffix (Jr., Sr., I, II, III, IV, V)		
FATHER	State or Foreign Country of Birth				Sirth Date (Month, Day, Year)  Social Security Number If none, check I			r If none, check box 🗖		
FAT	Hispanic Origin (Write "None" or Specify) Race			E		Education (Highest Grade Completed)		Daytime Phone (Include Area Code		
Address (Street Address AND P.O. Box) (City, Town or Location) (State and Zip Code)										
	Mother's Name	First Midd	lle If none, che	eck box 🗖	Current Last N	lame (surname)	Last N	ame (surname) Befor	e Any Marriage	
~	State or Foreign	Country of Bir	th Birth D	ate (Mont	h, Day, Year)	Social Security Number	r If none, check box □		(Include Area Code)	
MOTHER	Address (Street Address AND P.O. Box) (City, Town or Location) (State and Zip Code)									
MO									een.	
	I was <u>not</u> legally married to anyone at the time of the child's conception, birth, and any time between.  I <u>was</u> legally married to someone other than the father of this child. As required by lowa law, attached to this affidavit is a certified copy of the final court order signed by a judge and filed with the Clerk of District court that rules that the individual to whom I was legally married is not the father of this child.									
A	AFFIRMATION: Eac	h parent must si	gn and date t	this form	in the present	ce of an authorized notary pu	ıblic. Notary	completes and sig	ıns below.	
AFFIRMATION: Each parent must sign and date this form in the presence of an authorized notary public. Notary completes and signs below.  FATHER: I affirm that this information is true and correct to the best of my knowledge, that I have read and understand my rights, responsibilities, alternatives, and consequences, and that I am signing this paternity affidavit voluntarily. I further acknowledge that I am the biological father of the above named child and I do hereby give my permission to enter my name as the legal father on the birth certificate.  MOTHER: I affirm that this information is true and correct to the best of my knowledge, that I have read and understand my rights, responsibilities, alternatives, and consequences, and that I am signing this paternity affidavit voluntarily. I am the birth mother of the above named child and do hereby consent to the assertion of paternity in this affidavit and give my permission to enter the above named father as the legal father on the birth certificate.										
Fa	ther's Signature		Date Si	gned (Mor	th, Day, Year)	Mother's Signature		Date Sign	ned (Month, Day, Year)	
	State of							•	SS.	
Sig	gned and affirmed in my	presence by the fa	ther named abo	ove in this a	ttidavit.	Signed and affirmed in my p	Signed and affirmed in my presence by the mother named above in this affidavit.			
No	otary Public's Signa	ture	Date Sig	<b>jned</b> (Mon	th, Day, Year)	Notary Public's Signatu	ire	Date Sign	ed (Month, Day, Year)	
My commission expires:						My commission expires:				
Stamp or Seal							Stamp or	Seal		